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APPLICANTS

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** CONTINUING DATA *****

C.S. *none*

** FOREIGN APPLICATIONS *****

C.S. *none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 02/19/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 0	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 2
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35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after

Verified and Acknowledged *Carlie Shusha*
 Allowance Examiner's Signature Initials

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TITLE
 Opaque ink coloring compositions

FILING FEE RECEIVED 495	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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